

large hospital. To my disappointment I was given work in the postoperative ward, instead of dressing or operating room, the same work that I did before graduating. I also wanted theoretical work, but as there were no classes for the graduates, I attended the junior class lectures, if I made arrangements with the head nurse to have my hours "off duty" at that time. The lectures were very good, but it was only a repetition for me instead of an advancement.

After that I took charge of the surgical work in another hospital for several months, from which I not only derived great benefit, as getting new ideas in surgical work, etc., but also received my salary every month. I would have felt well repaid for the time spent there without any remuneration whatever. I sincerely hope the time is not far distant when all training schools will be up to the standard and a general postgraduate school will exist which will be a blessing to all nurses and to the community at large.

E. F. R.

[To take a position as graduate head nurse in a good hospital is one of the best ways of getting postgraduate work.—Ed.]

## II

DEAR EDITOR: The article in the January issue of *THE AMERICAN JOURNAL OF NURSING* by Miss Goodrich on "Postgraduate Work in Bellevue and Allied Hospitals" has greatly interested me.

It is my desire to take a postgraduate course somewhere, but I wish to avoid repeating an experience of a few years ago when, endeavoring to find a good course in contagious diseases, after writing to various hospitals, I entered one which was advertising such a course. According to its curriculum it gave lectures and instruction bearing upon the work.

To my horror I found that the ward maid went about in a woollen dress skirt! In an anteroom to the diphtheria pavilion was a closet in which gowns and hoods were kept for both doctors and nurses, all mixed in together. The doctors put the gowns on when entering the pavilion and the nurses put on gowns when going out of the pavilion. A rather remarkable method for a present-day hospital to use in dealing with germs, was it not?

Carbolic acid was supplied only in solution, being mixed (as I understood) by the supervisor of nurses in her office. One day our bottle, which had been taken out to be filled, was returned to us with carbolic globules floating about in the solution!

This is but a portion of what might be said concerning what was seen in a two weeks' stay at a *postgraduate* hospital for the two contagious diseases, scarlet fever and diphtheria. I might add that I heard no lectures.

H. M. C.

## BETTER INSTRUCTION NEEDED

DEAR EDITOR: Having recently been, myself, a patient in a hospital that is a training school, I had to blush once more for a mistake I have heard from pupils and even graduates, of more than one school. It appears that many a nurse is not taught that *enemata* is always and only a word of plural meaning, exactly equivalent to *enemas*, the first being a Greek, the second an English form. For the credit of our profession nurses should learn better than to speak of "a nutrient enemata." Whether it be given for cleansing, for nourishment, or for any other purpose, the enema is still an enema, and the plural form

*enemata* is as applicable to one sort of enema as to another, and not, as some nurses seem to think, merely to the nutrient.

Furthermore, I heard a nurse speak of "*catherizing* a patient!"

I must confess that these indications of poor intellectual training make me feel ashamed. Every nurse among us should take pride in using correctly the technical words that belong to our work. If we are careless we bring upon our whole profession the reproach of unintelligence. X.

#### REGISTRATION OF CERTIFICATES

DEAR EDITOR: I would like to ask through the JOURNAL why we registered nurses are expected and requested to record our certificates every three years, or, indeed, why once is not sufficient. The doctors register but once.

Before we were given the right to register we were told that "nurses might have a professional degree given by the state as well as doctors;" now many of us are wondering why we must, unlike them, periodically record our certificates. Other legal documents do not require to be so dealt with—why these? Besides it is most inconvenient to attend to this at the time required, if one is out of town. An explanation will be appreciated. E. L. P.

[The provision in the New York law requiring registration of certificates every three years was inserted in the original bill on the recommendation of a number of prominent officials of the New York Medical Society as a safeguard against theft, or the appropriation of registration certificates after death, as has been known to frequently occur in the medical profession. It is supposed to give the nurses greater protection than the doctors have.—Ed.]

#### MISSIONS TO LEPERS

DEAR EDITOR: The JOURNAL of February has just come to me, out on a case in the country, and I noticed among other things the request for information about missions to lepers, where they are located, and if nurses are employed in the care of such patients. Allow me for to-day to give you the following brief information.

The Moravian Church has, for more than forty years, carried on the work of caring for lepers in Jerusalem, and since the early eighties nursing sisters of the Moravian Deaconess' Home of Neisky, Germany, have been employed in the care of these patients. At present, four sisters, with an adequate staff of helpers, are taking care of from fifty to sixty of the poorest of the poor at the hospital "*Jesus Hilfe*," Jerusalem. At "*Bethesda*," Paramaribo, Surinam, four other sisters of the same institution are taking care of the same class of patients; this work is of more recent date.

In Central Africa, the Moravian Church has occasion to care for lepers, although here there is not yet a regularly established hospital for them.

In Western Himalaya, in connection with the regular hospital work at Leh, Ladakh, these patients come under their care, and I, myself, as missionary nurse have taken care of several, while engaged in the work out there. The state hospital for lepers of Kashmir is under the supervision of the well-known Doctors A. and E. Neve, medical missionaries at Srinigar, and though here no actual trained European nurses are employed, their influence is made to bear upon the whole institution.